PTO/S8/06 (08-03) Approved for use through 7/31/2008. OMB 0651-0032 edemark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERC.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Application or Doctor Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) NUMBER FILED MUMBER EXTRA RATE RATE FEE FEE BASIC FEE (37 CFR 1.16(n)) OR TOTAL CLAIMS minus 20 · (37 CFR 1.16(d) X S • OR INCEPENDENT CLAIMS minus 3 • OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d) OR " If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN OR (Calumn 2) (Column 1) (Column 3) SMALL ENTITY CLAIMS REMAINING HIGHEST NUMBER PRESENT ADDI-TIONAL RATE RATE ADOI-TIONAL AFTER AMENDMENT PREVIOUSLY EXTRA PAID FOR FEE Total prom unapa Minus OR Independent Of CFR 1,1800 X S OR FIRST PRESENTATION OF MULTIPLE DEPONDENT CLAIM (07 CFR 1.1840) OR + 8 TOTAL ADD'L FEE DO'L FEE (Caturno 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PREVIOUSLY PRESENT RATE ADOI-TIONAL RATE ADDE-AFTER EXTRA TIONAL AMENDMENT PAID FOR FEE FEE Total at CFR Lunco Mau AMENDA OR DI CAN I'ITO'S OR RRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (1)7 CFR 1.(6(1)) OR TOTAL OTAL . ADD'L FEE OR ADD'L FEE (Column 1) (Calumn 2) (Column 3) CLAIMS MIGHEST NAMBER PREVIOUSLY REMAINING PRESENT RATE ADDI-TIONAL RATE ADDL ENT AFTER EXTRA TIONAL PAID FOR FEE PEE Total professings 20 D AMENDA

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR L1800)

Independent (IF CFR 1.180g

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* If the entry in column 1 is less than the entry in column 2, with "O' in column 3.

"If the "Fighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Fighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Fighest Number Previously Paid For" (Total or independent) is the Highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1,16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Conditionable the completed application form to the USPTO. There will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief intermation Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

X S

X 8

TOTAL

ADD'L FEE

OR

OR

OR

OR

X 3

X S

TOTAL

ADD'L FEE

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.